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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
Fee TRANSMITTAL		Application Number	10772,550-Conf. #5602
For FY 2006		Filing Date	February 3, 2004
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Robert L. Horton
<input type="checkbox"/> TOTAL AMOUNT OF PAYMENT (\$)		Examiner Name	Not Yet Assigned
1,020.00		Art Unit	3676
		Attorney Docket No.	05542/072002

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input checked="" type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify):
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number: <u>50-0591</u> Deposit Account Name: <u>Osha · Liang LLP</u>		

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Credit any overpayments

FEES CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)	<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Small Entity</u>
<u>8</u>	<u>- 20 =</u>	<u>x</u>	<u>=</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
				HP = highest number of total claims paid for, if greater than 20.	
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
<u>2</u>	<u>- 3 =</u>	<u>x</u>	<u>=</u>		
				HP = highest number of independent claims paid for, if greater than 3.	

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
		<u>- 100 =</u>	<u>/50</u>	<u>(round up to a whole number) x</u>

<u>4. OTHER FEE(S)</u>	<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): <u>1253 Extension for response within third month</u>	<u>1,020.00</u>

SUBMITTED BY

Signature	/Jeffrey S. Bergman/	Registration No. (Attorney/Agent)	45,925	Telephone	(713) 228-8600
Name (Print/Type)	Jeffrey S. Bergman			Date	August 3, 2006